

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		
O.I.P.E. CLASSIFIER		245	03-11-99
FORMALITY REVIEW	RR	70029	3-6-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
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40	✓	✓	✓
41	✓	✓	✓
42	✓	✓	✓
43	✓	✓	✓
44	✓	✓	✓

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions